

Not for the faint-hearted

If you can rise to the challenge of prison nursing, you may well influence the care of disadvantaged people

CHALLENGING LEADERSHIP opportunities for nurses abound in prison nursing. Because of the higher psychiatric morbidity among prisoners than in the general population, prison nurses devote much of their time to the mental health aspects of inmates' health.

Approximately 1,200 registered nurses are employed in the prison service, of whom 25 per cent are mental health nurses. There are around 700 healthcare officers and approximately 35 per cent of these are registered nurses.

The prison environment and management infrastructure are designed for security and custody. Health care is not the purpose of imprisonment yet all prisons have a healthcare service of some kind. The courts still remand people to prison for psychiatric assessment and reports, presumably because the NHS cannot always provide such a service.

All those sent to prison will arrive first at a local prison. The initial induction to prison is known as reception and includes a healthcare screening, an important part of which is a mental health screen.

Often there is scant information, a distressed respondent, scores more prisoners waiting to

be processed and very hassled discipline staff.

As a prison nurse in a local institution, you will usually receive 20 or more new inmates within two or three hours every day. Although these challenges sharpen your skills as a mental health nurse, you must be sufficiently confident to quickly assess any risks the prisoner may present to themselves and to others.

The person you have assessed may then be admitted to the healthcare centre where you will need to develop strong relationships based on trust and mutual respect with other prison staff.

Nurses in the prison service are not the only experts in patient care. Officers are often the first person a prisoner will turn to in distress. Non-registered staff in the prison service are highly trained and skilled in managing aspects of mental illness as well as the difficult

behaviour displayed by many inmates

Nurses must be able to work alongside their colleagues bringing complementary skills to the team. In many instances, it is the therapeutic use of your personality that will enable you to improve care for the mentally ill inmate.

You must be capable of challenging external agencies – the probation services, NHS trusts,

voluntary groups and health authorities, so that they become actively involved in the rehabilitation process. The efficiency and capability of the current inpatient model of prison healthcare are being questioned increasingly, and many suspect that prison health care should resemble the community service model seen in the NHS.

As a registered nurse with experience of equitable and accessible health services, you would be well placed to influence the structure and provision of prison health care if this model were to be adopted.

But persuading the prison service of your value doesn't come easy – that job doesn't leap out of *Nursing Standard's* jobs pages for you must market your skills. For example, a joint appointment between a local prison and the health authority would meet their common agenda for partnership arrangements.

Never accept a clinical grade lower than grade E. Prison nursing is not for the faint-hearted or for those practitioners who require a structured and settled workplace. But if your personality thrives on leading and influencing in a professionally impoverished environment, you won't find many better opportunities to improve the care of socially excluded, mentally ill citizens **■**

Steven Gannon was Healthcare Manager at HMP Bedford at the time of writing this article

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